

45145 W. Madison Ave. P.O. Box 610 Maricopa, AZ 85139 Ph: 520.568.9098 Fx: 520.568.9120 www.maricopa-az.gov

BUSINESS LICENSE FEES MUST ACCOMPANY APPLICATION For questions pertaining to this application, please call the City Clerk Department at (520) 568-9098

Please Read Carefully Incomplete Applications Will Not Be Processed

- Please type or print. Answer each question. If the questions are not applicable, put "N.A." in the appropriate space.
- Attach a copy of your Arizona Transaction Privilege (Sales) Tax (TPT) License, if your type of business is required to collect and remit sales tax. If The City of Maricopa is not included on your current TPT license as a program city, you must contact the Arizona Department of Revenue at (602) 542-4576. (See bottom for fee schedule). The business license will not be issued until the applicant has updated their TPT license with the state.
- Contractor's, please attach a copy of your Arizona State Contractor's License.
- The building must have a certificate of occupancy from the Building Department.
- The Fire Department will inspect your building prior to the issuance of the business license. They will contact you for an appointment.
- If you plan to have a new sign, a permit is required through the Planning & Zoning Department.
- If liquor is involved, you must apply with the Arizona Department of Liquor Licenses and Control. The fee for your business license will be an additional \$100.00 per year.
- The owner shall inform the City of Maricopa of any changes in his/her business activities or uses 30 days prior to change.
- Attach a copy of the Pinal County health card if you will be selling edible foodstuffs.
- The Business License must be on display in the licensee's place of business. Typically the license will be issued within 10-15 working days. A license must be issued before you can lawfully engage in business in Maricopa.
- Issuance of a Business License by the City of Maricopa shall in no way be construed as permission to operate a business activity in violation of any other law or regulation to which such activity may be subject.

ATTENTION APPLICANT

<u>Issuance of a business license by the City of Maricopa does not permit full occupancy of the proposed</u> location. The applicant is required to contact building safety for necessary permits/inspections.

CITY OF MARICOPA BUSINESS LICENSE FEES SCHEDULE

The annual Business Transaction Fee is \$50.00. The fee is prorated to $\frac{1}{2}$ a year. All licenses applied for after the month of June will be \$25.00*. All licenses expire December 31 of each year.

January	\$50.00
February	\$45.83
March	\$41.67
April	\$37.50
May	\$33.34
June	\$29.17
*July-December	\$25.00

In addition to the Fifty Dollar (\$50.00) fee, every person, firm, corporation or other entity applying for a spirituous liquor license, shall tender to the city a fee of One Hundred Dollars (\$100.00).

ARIZONA DEPARTMENT OF REVENUE FEES

The Arizona Department of Revenue has made it possible for you to apply and pay for a Transaction Privilege Tax License online at www.aztaxes.gov. At the end of the process you will be able to print a signature card which you then will attach to your City of Maricopa Business License Application. You can print a copy of their application at www.revenue.state.az.us/tpt forms.htm. For more information you may contact the Arizona Department of Revenue at



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COMMERCIAL LICENSE APPLICATION

Check One: () New Business () Existing Business () Change of Ownership () Location Change () Business Name Change () Other:												
SECTION I. BUSINESS INFORMATION												
Business Nan												
Physical Add												
_												
Phone Numb	er:				Email Ad	dress:						
AZ Transactio	on Privile	ge Tax L	icense	e Number '	*:			Con	tractor Lic	ense Numbei	·*:	
Business Type: () Retail Sales () Wholesaler () Amusement () Construction Contracting () Restaurant/Bar () Manufacturer () Commercial Rental () Residential Rental (# of Units) () Hotel/ Motel () Service () Other												
Describe Nature of Business:												
*Must Include a Copy of License(s)												
SECTION II. APPLICANT INFORMATION												
Owners, Pa	1)											
LLC Membe		Owner or Corporation Name								Title		
Officers (For Addition Names, Please Attach		Home Address				City			State	Zip C	ode	
	2)	Name								Ti	Title	
		Home	Addr	ress City					State Zip Code			
Check one: Do you own your business location? () Yes () No If no, complete Landlord/ Property Manager Information												
Landlord/ Property Manager: Name Address Phone No.												
I certify that the statements made in this application are true and complete to the best of my knowledge. I accept the license authorized and issued in response to this application with the condition that I report timely and pay any and all taxes due by me to the city. Incomplete forms may not be processed.												
Print Name				Signature		Ť			Title		Date	
License Fee	Fee Receipt #		Licen	ise #	FOR C	Fire Departs		Build	ing Safety	Comments:		